

Missouri Weekly Influenza Report 2007-2008 Season¹

Missouri is reporting "Regional" to the CDC for Week 12².

To view influenza maps click here. Each map will give county data by placing the cursor over the county.

Table 1. Reported Laboratory cases by sub-type for the Week ending March 22, 2008 (Week 12)

Serogroups	A (non-typed)	A (H1)	A (H1N1)	A (H3)	В	A or B Untyped (rapid test)	Total
Week 12	253	0	0	2	340	112	707

⁷⁰³ cases by rapid non-culture diagnostic test, 2 culture confirmed type A (H3) and 2 culture confirmed type B have been reported for week 12.

Table 2. Influenza Season-to-Date and 5-season Median by Influenza Type
Through Week Ending March 22, 2008 (Week 12)

Influenza Type	2007-08 Season	5-Season Median	Percent Change from 5-Season Median
Influenza A	16,826	7,823	115.1%
Influenza B	4,555	855	432.7%
Influenza Unknown Or Untyped	6,660	3,113	113.9%
Total	28,041	11,336	147.4%

Table 3. Influenza Season-to-Date and 5-season Median by Age Group Through Week Ending March 22, 2008 (Week 12)

Age Group	2007-08 Count	5-Season Median	Percent Change from 5-Season Median
00-<02	3,008	1,434	109.8%
02-04	3,276	1,425	129.9%
05-14	5,841	2,754	112.1%
15-24	3,846	1,247	208.4%
25-49	7,252	1,842	293.7%
50-64	2,305	594	288.0%
65+	2,513	1,269	98.0%
Total	28,041	11,336	147.4%

Table 4. Influenza Season-to-Date and 5-season Median by Region Through Week Ending March 22, 2008 (Week 12)

Region	2007-08 Count	5-Season Median	Percent Change from 5-Season Median
CE	4,887	1,681	190.7%
EA	9,524	3,485	173.3%
NW	7,719	3,829	101.6%
SE	1,992	660	201.8%
SW	3,919	2,017	94.3%
Total	28,041	11,336	147.4%

Table 5. Deaths involving Pneumonia and Influenza (P&I) Reported During the Week Ending March 15, 2008 (Week 11)*

Week 11	Week 11 Season-to-Date		5 Year Weekly Median	
116	1714	105	112	

^{*} Beginning in Week 35 of 2003, the number of P&I deaths became based on a new system of retrieval that now includes <u>all</u> contributing causes of death from death certificates.

Graph 1. Influenza 2007-08 Season-To-Date as compared to the previous 4 influenza seasons
Through the Week Ending March 22, 2008 (Week 12)

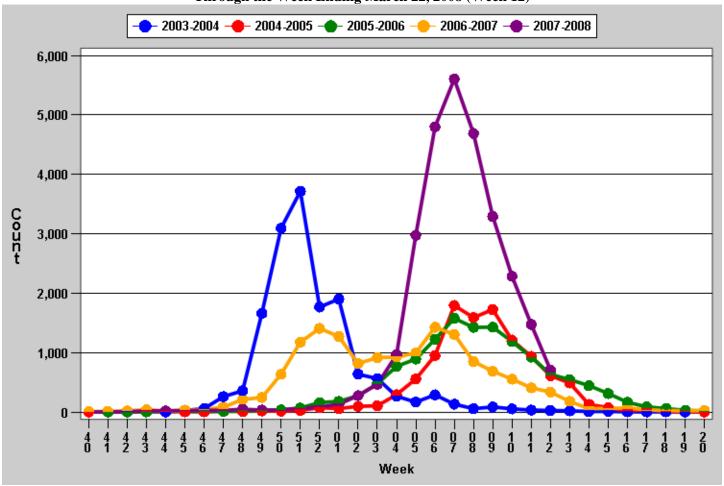


Table 6. Respiratory Specimens Submitted to SPHL for Viral Testing Through the Week Ending March 22, 2008 (Week 12)*

	Positive Influenza	Total Number Specimens Submitted	
Week 12	4	8	
Season-to-Date	86	180	

^{*}Number positives also represent past weeks specimens submitted.

Table 7. U.S. Influenza Sentinel Physicians Surveillance Network (USISPSN)*
Influenza-like Illness (ILI) for the Week Ending March 15, 2008 (Week 11)

Age	Age	Age	Age	Total ILI	Total	Percent
0-4	5-24	25-64	65+	Patients Seen	Patients Seen	ILI**
6	10	8	0	24	1374	

^{*}To learn about USISPSN, view the following website: http://www.cdc.gov/flu/weekly/fluactivity.htm

Graph 2. Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE)*
Weekly percent of ER visits with the chief complaint of Influenza-like Illness, from participating hospitals.

Through the Week Ending March 22, 2008 (Week 12)



^{*}To learn more about ESSENCE, view the following website: http://www.dhss.mo.gov/ESSENCE/

Antigenic Characterization of Missouri Influenza Isolates submitted to CDC by the State Public Health Laboratory: CDC antigenically characterizes a sample of positive Missouri influenza isolates, submitted through the Missouri Department of Health and Senior Services (DHSS), State Public Health Laboratory (SPHL). DHSS has submitted twenty-eight influenza isolates this season to CDC for antigenic characterization.

Results Received from CDC: Influenza B viruses currently circulating can be divided into two antigenically and genetically distinct lineages represented by **B/Yamagata/16/88 and B/Victoria/2/87** viruses.

CDC has antigenically characterized two isolates this season from Missouri: B/FLORIDA/04/2006-LIKE virus and A/WISCONSIN/67/2005-LIKE (H3N2) LOW.

Both LAIV and TIV contain strains of influenza viruses that are antigenically equivalent to the annually recommended strains: one influenza A (H3N2) virus, one influenza A (H1N1) virus, and one influenza B virus. Each year, one or more virus strains might be changed on the basis of global surveillance for influenza viruses and the emergence and spread of new strains. Only the H1N1 strain was changed for the recommended vaccine for the 2007–08 influenza season, compared with the 2006–07 season. Viruses for both types of currently licensed vaccines are grown in eggs. Both vaccines are administered annually to provide optimal protection against influenza virus infection. Both TIV and LAIV are widely available in the United States. Although both types of vaccines are expected to be effective, the vaccines differ in several aspects.

^{**}This is above the regional baseline percent of 1.5%

Clusters/Outbreaks of Influenza-like Illness: No school closings have been reported for week 12 of current season; No school closings were reported last season. No outbreaks have been reported for week 12 of the current season; no outbreaks were reported last season.

Data Sources: Laboratory-confirmed cases are reported to DHSS through the passive communicable disease surveillance system. Suspected influenza clusters and outbreaks are reported through the active surveillance system. Pneumonia and influenza deaths are reported through the DHSS Bureau of Vital Records. Influenzalike illness data by age category and total number of patient visits by week are reported voluntarily by participants in the U.S. Influenza Sentinel Physicians Surveillance Network.

Find Us on the Web

This report may also be found on the DHSS Internet at: www.dhss.state.mo.us/Influenza/index.html.

National influenza surveillance information is available from the Centers for Disease Control and Prevention at: www.cdc.gov/ncidod/diseases/flu/weekly.htm.

Contact Us

The Missouri Department of Health and Senior Services after hours number for reporting disease cases and emergencies is **1-800-392-0272**.

¹All data in this report are provisional and may change as reports are updated.

²Influenza activity codes are reported to CDC each Monday.